

FAX 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM

**DISCLOSURE SUMMARY PAGE**

## File with:

Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup> Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.  
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

IA ETHICS AND  
CAMPAIGN DISCLOSURE BD

010 JAN 20 AM 9:01

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

BUEHAN COUNTY - DEMOCRATIC CENTRAL COMMITTEEIMPORTANT: Indicate by # type of committee you are reporting for: 4

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC  
(11) Local Ballot Issue

## CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

FORM <b>DR-2</b> (Rev. 12/2009)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	_____
Logged In	_____
Scanned	_____
Computer	_____
Audited	_____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

James Hoffmann  
SIGNATURE OF PERSON FILING REPORT

(319) 448-4549  
TELEPHONE

01/19/2010  
DATE SIGNED

I AM FILING A JANUARY 19, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 2☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

**STATEMENT OF CASH ON HAND**

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 6,142.13

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (\*\*also see in-kind below)

3,160.45

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 9,302.58

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,950.96

Schedule F: Loan Repayments total (Attach Schedule F)

7,351.62

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 7,351.62

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 225.00

\*\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 225.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 225.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES NO

## CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ \_\_\_\_\_

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

68B-32A

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**CONTRIBUTIONS -- MONEY TAKEN IN**  
 (Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	<input type="checkbox"/> IF FOR FUND-RAISER INCOME
01-12-09 to 12-14-09	ID# CK#	SECURITY STATE BANK INDEPENDENCE, IOWA	Interest on SAVINGS for 2009	\$ 200	<input type="checkbox"/>
04-01-09	ID# CK#	UNITEMIZED CONTRIBUTIONS		70 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	KAY HOFFMAN AURORA, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	GARY SCHWEITZER LAMONT, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	BONITA DAVIS INDEPENDENCE, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	KAYE WHITE INDEPENDENCE, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	STELLA MAZUR ROWLEY, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	PAT O'LAUGHLIN INDEPENDENCE, IOWA		25 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	RICHARD SLOAN ROWLEY, IOWA		50 00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	GERALD DENNIE WINTHROP, IOWA		60 00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 332 00	
TOTAL (If last page of this schedule)				\$	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

 Page 1 of 7  
 (for Schedule A)

For Instructions, See Back of Form

8-B4501B

## CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
04-01-09	ID# CK#	JAMES HOFFMAN WALKER, IOWA		\$100.00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	SHIRLEY BRACE INDEPENDENCE, IOWA		65.00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	JIM GROVER ROWLEY, IOWA		100.00	<input checked="" type="checkbox"/>
04-01-09	ID# CK#	RICHARD MACHACEK WINTHROP, IOWA		100.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	unitemized contributions		45.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	BILL WOLFGANG HAZLETON, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	ELLEN McGRATH INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	DIANE CURRY INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	MILLIE CAMERON INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	DOROTHY SMITH INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$495.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

3-6-01

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 66B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
04-02-09	ID# CK#	LINDA HELT ROWLEY, IOWA		\$ 25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	PAM HOSAN WINTHROP, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	LEE WHITE WINTHROP, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	CONNIE MAHONEY INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	GAYLE COPENHAVER INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	PAT ARTHAUD HAZLETON, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	RANDY HOFFMAN INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	ELNICE MAHONEY INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JUDY HARLAND INDEPENDENCE, IOWA		45.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	RALPH KREMER AURORA, IOWA		50.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 295.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

6-B-018

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	<input type="checkbox"/> IF FOR FUND-RAISER INCOME
04-02-09	ID# CK#	TOM HEFFERNAN JESUP, IOWA		\$ 50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JOHN HOGAN WINTHROP, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	KIM STIMSON INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	LEO DUNNELLY INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JOAN MILLER FAIRBANK, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	CINDY (WITT) GOSSE JESUP, IOWA		45.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	MIKE FERRETER INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	PHYLLIS LEITZ AURORA, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	MARY KLOTZBACH INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JOHN KLOTZBACH INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 495.00	
<b>TOTAL (if last page of this schedule)</b>				\$	

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(for Schedule A)

For Instructions, See Back of Form

eX-101

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME (Must be same as on Statement of Organization)**BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
04-02-09	ID# CK#	ROLAND CAYOQUETTE JESUP, IOWA		\$ 50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	BILL REEDY BRANDON, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	TOM CORKERY JESUP, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	ROBERT FRIDLEY INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JOY SANDERS INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	MICHELLE FICKEN INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JAKE BLITSCH DELUER, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	FRANCIS TORLE INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	BILL HICKEY INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
04-02-09	ID# CK#	JUDY PIERCE INDEPENDENCE, IOWA		50.00	<input checked="" type="checkbox"/>
<b>SUB-TOTAL</b>				\$ 500.00	
<b>TOTAL (If last page of this schedule)</b>				\$	

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(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS - MONEY TAKEN IN**  
(Including candidate's personal funds)

e-Budget

<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONEY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)PALMACHAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	IF FOR FUND-RAISER INCOME
04-02-09	ID# CK#	ELLEN GAPPNEY HAZLETON, IOWA		\$ 50.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	UNITEMIZED CONTRIBUTIONS		271.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	JAKE BLITZEL OELWEN, IOWA		30.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	RICHARD MACHACEL WINTHROP, IOWA		27.50	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	BILL WOLFGAM HAZLETON, IOWA		32.50	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	DOUG EARLES JESUP, IOWA		50.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	ROGER EDINGTON MANCHESTER, IOWA		25.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	IRMA HOPKINS JESUP, IOWA		25.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	MARY LULOFF AURORA, IOWA		50.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	JIM ROZENDRAHL INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
SUB-TOTAL				\$ 586.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**  
(Including candidate's personal funds)**COMMITTEE NAME** (Must be same as on Statement of Organization)BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

<b>SCHEDULE A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	<input type="checkbox"/> IF FOR FUND-RAISER INCOME
04-06-09	ID# CK#	BRIAN SHOENJAHN ARLINGTON, IOWA		\$50.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	JEANNE SHANNON INDEPENDENCE, IOWA		25.00	<input checked="" type="checkbox"/>
04-06-09	ID# CK#	ROBERT SHIELD FAIRBANK, IOWA		25.00	<input checked="" type="checkbox"/>
04-09-09	ID# CK#	DONNA O'LAUGHLIN INDEPENDENCE, IOWA		25.00	<input type="checkbox"/>
04-29-09	ID# CK#	JIM MICHELS HAZLETON, IOWA		25.00	<input type="checkbox"/>
06-16-09	ID# CK#	UNITEDIZED CONTRIBUTIONS		153.00	<input type="checkbox"/>
07-09-09	ID# CK#	SECURITY STATE BANK INDEPENDENCE, IOWA	INTEREST @ 8%	104.45	<input type="checkbox"/>
12-01-09	ID# CK#	BUCHANAN COUNTY AUDITOR INDEPENDENCE, IOWA	MEETING ROOM DEPOSIT REFUND	50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$457.45	
TOTAL (if last page of this schedule)				\$3160.45	

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(for Schedule A)



FOR INSTRUCTIONS, SEE BACK OF FORM

eX-1011

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/20/09	ID# CK# 482	BUCHANAN COUNTY FAIR ASSN INDEPENDENCE, IA	RESERVE FAIR BOOTH	\$ 100.00
3/05/09	ID# CK# 483	1 <sup>ST</sup> DISTRICT DEMOCRATIC	Delegate Fee (3 @ 5 <sup>00</sup> )	15.00
3/05/09	ID# CK# 484	BULLETIN-JOURNAL News Paper INDEPENDENCE, IOWA	CAUCUS Ad	59.76
3/17/09	ID# CK# 485	DIANE CURRY INDEPENDENCE, IOWA	SUSTAINING FUND BANQUET TABLE DECORATIONS REIMBURSE	136.10
4/06/09	ID# CK# 487	TROTT'S TROPHIES WINTHROP, IOWA	DEMOCRAT OF THE YEAR PLAQUE AWARDED AT BANQUET	38.52
4/06/09	ID# CK# 488	PRINT EXPRESS INDEPENDENCE, IOWA	SUSTAINING FUND BANQUET INVITATIONS PRINTING	62.00
4/07/09	ID# CK# 489	BILL'S PIZZA and Smokehouse INDEPENDENCE, IOWA	SUSTAINING FUND BANQUET MEALS	960.54
4/20/09	ID# CK# 490	DIANE CURRY INDEPENDENCE, IOWA	REIMBURSE FOR GIFT TO SUSTAINING FUND BANQUET SPEAKER	68.05
SUB-TOTAL				\$1,439.97
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

e-x-2011

**EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5/01/09	ID# CK# 491	U. S. POST OFFICE INDEPENDENCE, IOWA	MONTHLY MEETING NOTICE POST CARDS	\$ 83.70
5/23/09	ID# CK# 492	CEDAR VALLEY HOSPICE INDEPENDENCE, IOWA	DONATION IN MEMORY OF FORMER CENTRAL COMMITTEE MEMBERS (2 @ 25 <sup>00</sup> )	50.00
6/25/09	ID# CK# 493	DOLLARS FOR SCHOLARS % MARTY BROWN INDEPENDENCE, IOWA	SCHOLARSHIP FOR DESERVING GRADUATING SENIOR	250.00
6/25/09	ID# CK# 494	TROTTS TROPHIES WINTHROP, IOWA	PLAQUE FOR HARD WORKING DEMOCRAT	24.08
7/13/09	ID# CK# 495	JAMES HOFFMAN WALKER, IOWA	REIMBURSE FOR BENEVOLENT GIFT (GAS CARD)	25.00
7/15/09	ID# CK# 496	1 <sup>ST</sup> DISTRICT DEMOCRATS	ADVERTISEMENT	25.00
8/03/09	ID# CK# BANK DEBIT	SECURITY STATE BANK INDEPENDENCE, IOWA	FUNDS TRANSFER CHARGE	3.21
10/10/09	ID# CK# 497	CEDAR VALLEY HOSPICE INDEPENDENCE, IOWA	DONATION IN MEMORY OF FORMER CENTRAL COMMITTEE MEMBER	25.00
SUB-TOTAL				\$485.99
TOTAL (If last page of this schedule)				\$

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

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Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

6-88018

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONEY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

BACHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
12/20/09	ID# CK# 498	CEDAR VALLEY HOSPICE INDEPENDENCE, IOWA	DONATION IN MEMORY OF CENTRAL COMMITTEE MEMBER SPOUSE	\$ 25.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 25.00
TOTAL (if last page of this schedule)				\$ 1,950.94

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

BUCHANAN COUNTY DEMOCRATIC CENTRAL COMMITTEE

SCHEDULE E

SCHEDULE

E

(Rev. 08/97)

IN KIND  
CONTRIBUTIONS☐ CHECK THIS BOX IF  
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
04-06-09	DOROTHY SMITH INDEPENDENCE, IOWA		WOOD CARVE; FIGURINE; WALL HANGING	\$ 45.00	<input checked="" type="checkbox"/>
04-06-09	LAREE RANDALL INDEPENDENCE, IOWA		DONKEY WALL HANGING	40.00	<input checked="" type="checkbox"/>
04-06-09	BILL WOLFGAM HAZLETON, IOWA		OBAMA COIN SET	50.00	<input checked="" type="checkbox"/>
04-06-09	LED DUNNELLY INDEPENDENCE, IOWA		MAPLE HOLDER MAPLE HOLDER RED HOUSE	45.00	<input checked="" type="checkbox"/>
04-06-09	RICHARD + CHERYL MACHIBER WINTHROP, IOWA		DONKEY PIN	25.00	<input checked="" type="checkbox"/>
04-06-09	PAM HOGAN WINTHROP, IOWA		EAGLE FIGURINE	20.00	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$ 225.00

TOTAL (if last  
page of this  
schedule)

\$ 225.00

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no

Page 1 of 1  
(for Schedule E)